FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

SE8 Mail Mail Processing Section

JUL 1 g 2008

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPRO	
OMB Number:	3235-0076
Expires:	
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hours per response	e 16.00

SEC USE ONLY							
Prefix		Serial					
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Washington, DC UNIFORM LIMITED OFFERING	EXEMPTION
Name of Offering of check if this is an amendment and name has changed, and indicate ch	ange.)
Series B Round of Equity	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Z Rule 506 S	ection 4(6) ULOE
Type of Filing:	PROCESSED
A. BASIC IDENTIFICATION DA	TA
1. Enter the information requested about the issuer	JUL 25 2008
Name of Issuer (check if this is an amendment and name has changed, and indicate changed RedZone Robotics, Inc.	THOMSON REUTERS
Address of Executive Offices (Number and Street, City, State, 2	ip Code) Telephone Number (Including Area Code)
91 43rd Street, Suite 250, Pittsburgh, PA 15201	(412) 476-8980
Address of Principal Business Operations (Number and Street, City, State, (if different from Executive Offices)	Zip Code) Telephone Number (Including Area Code)
Brief Description of Business	
Robotics company focused on developing semi-automated trenchless technology	solutions for several industry sectors.
Type of Business Organization	
corporation limited partnership, already formed	other (please specif
business trust limited partnership, to be formed	
Month Year	
Actual or Estimated Date of Incorporation or Organization: 019 817 Actual	Estimated
furisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation	
CN for Canada; FN for other foreign jurisdicti	on) [P][A]

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

	"事事人"。	A. BASIC II	ENTIFICATION DATA	The Grant Company	
2. Enter the information r	equested for the fo	ollowing:			
• Each promoter of	the issuer, if the is	ssuer has been organized	within the past five years;		
 Each beneficial ov 	vner having the pov	wer to vote or dispose, or d	lirect the vote or disposition	of, 10% or more o	f a class of equity securities of the issu
Each executive of	ficer and director	of corporate issuers and o	f corporate general and ma	maging partners of	f partnership issuers; and
 Each general and 	managing partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter		Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Close, Eric	if individual)			······································	<u></u>
Business or Residence Address 91 43rd Street, Suite 25		-	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Hillman, Henry, Jr.	if individual)				
Business or Residence Address 91 43rd Street, Suite 250		•	ode)	,	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Emerson, Thomas	f individual)				
Business or Residence Addre 91 43rd Street, Suite 250			ode)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	/ Director	General and/or Managing Partner
Full Name (Last name first, i Farmarie, Wilson	f individual)				
Business or Residence Addre 91 43rd Street, Suite 250		-	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Zolkos, Brian	f individual)				
Business or Residence Addre 91 43rd Street, Suite 250	=	•	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	(individual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	ode)		
	(Use blar	k sheet, or copy and use	additional copies of this sl	heet, as necessary))

) }	*	* · · · · · · · · · · · · · · · · · · ·	A THE BANK	مها الإجازية	В. 1	nformat	ION ABOU	IT OFFER	ING		· 1 3		4 (
1.	Has the	e issuer sol	ld. or does t	he issuer i	ntend to so	ell. to non-	accredited	investors i	n this offer	ing?		Yes	No IX
						n Appendis				_		_	
2.	What is	s the minir	num investr								*************	\$ 2,3	370.00
												Yes	No
3.			permit join										
4.	If a persor state	ssion or sin son to be li s, list the n	nilar remune sted is an as	ration for sociated pe proker or d	solicitatior erson or ag ealer. If m	n of purchas ent of a broi ore than fiv	ers in conn ker or deale e (5) perso	ection with or registere ns to be lis	sales of se d with the S ted are asso	curities in 1 SEC and/or	lirectly, any the offering. with a state sons of such	!	
Fui	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)					· · · · · · · · · · · · · · · · · · ·	
Nar	me of As	sociated B	roker or De	aler									
Sta	tes in Wi	hich Person	n Listed Ha	Solicited	or Intende	to Solicit	Purchasers						
	(Check	"All State	s" or check	individua	l States)	•••••				•••••	***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	l Name (I	Last name	first, if indi	vidual)							,		
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)				<u></u>		
Nan	ne of Ass	sociated B	roker or Dea	aler			<u> </u>	<u></u>					
Stat	es in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	**************		***************************************				☐ All	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (1	Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)			-			
Nan	ne of Ass	sociated Br	oker or Dea	ıler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	or check	individual	States)	•••••••	•••••	•		***************************************	•••••	☐ All	States
	AL TL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	:	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0.00	s_ 0.00
	Equity	5,049,089.84	\$ 5,049,089.84
	Common Preferred		
	Convertible Securities (including warrants)	§ 0.00	\$
	Partnership Interests		\$ 0.00
	Other (Specify)	§ 0.00	\$ 0.00
	Total	\$ 5,049,089.84	\$ 5,049,089.84
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases \$ 5,049,089.84
	Accredited Investors		· -
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	T. COSS.	Type of	Dollar Amount Sold
	Type of Offering	Security	
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$ 0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	Z	\$_30,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		s 30,000.00

5. I e c c p	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	Payments to Officers, Directors, & Affiliates	5,019,089.84 S
e c p	each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	Officers, Directors, &	Payments to
S	Salaries and fees	Officers, Directors, &	Payments to
S	Salaries and fees		Others
] \$. D \$
P	Purchase of real estate	- \$	_s
P	Purchase, rental or leasing and installation of machinery	-	
	Construction or leasing of plant buildings and facilities	_	_
A	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another ssuer pursuant to a merger)		
	Repayment of indebtedness		
	Working capital		_
	Other (specify):	-	_
_] \$	s
С	Column Totals	\$ <u>0.00</u>	\$_5,019,089.84
T	otal Payments Listed (column totals added)	□ \$ <u></u> 5,	019,089.84
,	D. FEDERAL SIGNATURE	1	1 , 1
signatı	suer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice cure constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss formation furnished by the issuer to any non-accredited in pestor pursuant to paragraph (b)(2) of Reference to the contract of th	ion, upon writte	
ssuer	(Print or Type) Signature D	ate	<u>.</u>
RedZ	Zone Robotics, Inc.	6/23/4	
_	of Signer (Print or Type) Title of Saner (Print or Type) ian J. Zolkos Vice President	-1 4 0	

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	E. STATE SIGNATURE	.u r	3
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🗷

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

	Λ.	
Issuer (Print or Type)	Signature	Date
RedZone Robotics, Inc.	LI N	6/2/16
Name (Print or Type)	Title (Pcint of Type)	· · · · · · · · · · · · · · · · · · ·
Brian J. Zolkus	1/1 Vice Pr	csident

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		· * t', */		Al	PPENDIX			t s to a	
1	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 f investor and archased in State to C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK						,			
AZ									
AR									
CA		×	Common Stock	2	\$100,000.0	0	\$0.00		×
со									
СТ		×	Common Stock	1	\$12,501.00	0	\$0.00		×
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
ſΑ									
KS									
KY									
LA	}								
ME									
MD									
MA		×	Common Preterred Soc \$78,712.09	2	\$78,772.29	0	\$0.00		×
МІ									
MN									
MS									

Intend to sell to non-accredited investors in State (Part B-Item 1) State Yes No Intend to sell to non-accredited investors in State (Part C-Item 1) Number of Accredited Investors Amount Investors Amount Number of Non-Accredited Investors Amount Number of Non-Accredited Investors Amount Non-Accredited Investors Amount	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) Yes No
State Yes No Accredited Investors Amount Non-Accredited Investors Amount MO Non-Accredited Investors Amount Non-Accredited Investors Amount Non-Accredited Investors Amount	Yes No
MT NE	
NE Language de la constant de la con	
Lance and general design of the second design of th	
NV	
1 P	
NH	
NJ Common Stock 1 \$5,047.00 0 \$0.00	×
NM NM	
NY Common Stock 2 \$44,980.00 0 \$0.00	×
NC NC	
ND ND	
ОН	
OK STATES OF THE	
OR X Common Stock 1 \$200,000 pt 0 \$0.00	×
PA X 007,789.55 13 \$4,607,789.55 \$0.00	×
RI RI	
sc Sc	
SD	
TN TN	
TX	
UT	
VT T	
VA VA	
WA WA	
wv	
WI WI	

	APPENDIX										
1		2	3		4			5 Disqualification			
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)		amount purchased in State		amount purchased in State			ate ULOE , attach eation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											

